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В	22C (Official	Form 2	2C) (Cha	pter	13)	(04/13))

In re	Tabatha Anne Shubert	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Nu		- ☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Pai	t I.	REPORT OF INC	COM	E				
	Mari	tal/filing status. Check the box that applies a	nd c	omplete the balanc	e of	his part of this stat	emen	t as directed.		
1		a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.								
		Married. Complete both Column A ("Debto					me'')	for Lines 2-10.	•	
	All figures must reflect average monthly income received from all sources, derived during the six						T	Column A	Column B	
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before						Debtor's	Spouse's		
		the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.					Income		Income	
2	Gross	s wages, salary, tips, bonuses, overtime, con	nmis	ssions.			\$	1,850.00	\$	
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV.									
				Debtor		Spouse				
	a.	Gross receipts	\$	0.00						
	b.	Ordinary and necessary business expenses	\$	0.00				0.00	Φ.	
	c.	Business income s and other real property income. Subtract	•	otract Line b from			\$	0.00	\$	
4	the ap	oppropriate column(s) of Line 4. Do not enter of the operating expenses entered on Line b	a nu as a	mber less than zero a deduction in Par Debtor	t IV.	not include any				
	a.	Gross receipts	\$	0.00						
	b.	Ordinary and necessary operating expenses	\$	0.00 lbtract Line b from			\$	0.00	¢	
-	c.	Rent and other real property income	St	intract Line b from	Line	a	1		•	
5		est, dividends, and royalties.					\$	0.00	\$	
6		Pension and retirement income.			\$	0.00	\$			
U		Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.								
7	exper purpedebto	nses of the debtor or the debtor's dependent ose. Do not include alimony or separate main r's spouse. Each regular payment should be re	ts, in itena eport	acluding child sup ance payments or a anced in only one colu	port noun	paid for that ts paid by the	\$	125.00	\$	
	exper purpodebtoo listed Unen Howe benef	nses of the debtor or the debtor's dependent ose. Do not include alimony or separate main r's spouse. Each regular payment should be re	ts, in tena eport Colu n the ensa e an	icluding child sup ince payments or a red in only one column B. e appropriate column tion received by you	moun noun nmn; nn(s)	paid for that ts paid by the if a payment is of Line 8. your spouse was a	\$	125.00	\$	

9	Income from all other sources. Specify source and a on a separate page. Total and enter on Line 9. Do not maintenance payments paid by your spouse, but incompared the maintenance. Do not include any benefits a payments received as a victim of a war crime, crime againternational or domestic terrorism.						
		Debtor	Spouse				
	a. \$ b. \$		\$ \$	\$	0.0	0 \$	
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Co in Column B. Enter the total(s).	olumn B is complete	ed, add Lines 2 thro	ough 9 \$	1,975.0	0 \$	
11	Total. If Column B has been completed, add Line 10, the total. If Column B has not been completed, enter the completed in the complete state.			l enter \$			1,975.00
	Part II. CALCULATION (· ·	ENT PE	ERIOD		
12	Enter the amount from Line 11					\$	1,975.00
13	Marital Adjustment. If you are married, but are not f calculation of the commitment period under § 1325(b) enter on Line 13 the amount of the income listed in Li the household expenses of you or your dependents and income (such as payment of the spouse's tax liability of debtor's dependents) and the amount of income devote on a separate page. If the conditions for entering this a. b. c.	(4) does not requir ine 10, Column B that d specify, in the lin- or the spouse's supp ed to each purpose.	e inclusion of the in nat was NOT paid of es below, the basis ort of persons othe If necessary, list a	ncome of on a regul for exclu or than the	your spouse, lar basis for ding this e debtor or the		
	Total and enter on Line 13					\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	•				\$	1,975.00
15	Annualized current monthly income for § 1325(b)(4 enter the result.	4). Multiply the an	ount from Line 14	by the nu	umber 12 and	\$	23,700.00
16	Applicable median family income. Enter the median information is available by family size at www.usdoj.g	family income for a gov/ust/ or from the	applicable state and clerk of the bankro	d househouptcy cou	old size. (This art.)		
	a. Enter debtor's state of residence: TN	b. Enter deb	tor's household size	e:	2	\$	48,617.00
17	Application of § 1325(b)(4). Check the applicable box and proceed as directed. ■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" top of page 1 of this statement and continue with this statement. □ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years at the top of page 1 of this statement and continue with this statement.						-
	Part III. APPLICATION OF § 1325	(b)(3) FOR DETE	RMINING DISPO	OSABLE	INCOME		
18	Enter the amount from Line 11.					\$	1,975.00
19	Marital Adjustment. If you are married, but are not f any income listed in Line 10, Column B that was NOT debtor or the debtor's dependents. Specify in the lines payment of the spouse's tax liability or the spouse's su dependents) and the amount of income devoted to eac separate page. If the conditions for entering this adjust a. b. c.	Γ paid on a regular below the basis for pport of persons of h purpose. If neces	basis for the housel excluding the Col- her than the debtor sary, list additional	hold expe umn B in or the de	enses of the come(such as ebtor's		
	Total and enter on Line 19.					\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract	Line 19 from Line	18 and enter the res	sult.		\$	1,975.00

21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.						\$	23,700.00	
22	Applicable median family income. Enter the amount from Line 16.							48,617.00	
23	132	isposable income is determ							
	■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete Part IV. CALCULATION OF DEDUCTIONS FROM INCOME								
		Part IV. C	ALCULATION (OF I	DEDUCTIONS FR	OM INCOME			
	_	Subpart A: D	eductions under Star	ndar	ds of the Internal Revo	enue Service (IRS)			
24A	National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$		
24B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.								
	Persons under 65 years of age			Pers	ons 65 years of age or ol				
	a1.	Allowance per person		a2.	Allowance per person				
	b1.	Number of persons		b2.	Number of persons				
	c1.	Subtotal		c2.	Subtotal		\$		
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.						\$		
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.								
		IRS Housing and Utilities							
		Average Monthly Payment home, if any, as stated in I		y you	r \$				
	c.	Net mortgage/rental expen	se		Subtract Line b fi	rom Line a.	\$		
2.5	c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities								
26		rds, enter any additional ar tion in the space below:	nount to which you cont		ou are entitled, and state t	he basis for your			

	Local Standards: transportation; vehicle operation/public transportation; expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.		
27A	Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7.		
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	e "Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public To Standards: Transportation. (This amount is available at www.usdoj.gr.court.)	you are entitled to an additional deduction for ransportation" amount from the IRS Local	\$
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.) \square 1 \square 2 or more.		
28	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 1, as stated in Li the result in Line 28. Do not enter an amount less than zero.	court); enter in Line b the total of the Average	
	a. IRS Transportation Standards, Ownership Costs	\$	
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 47	\$	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$
29	the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Li the result in Line 29. Do not enter an amount less than zero.	court); enter in Line b the total of the Average ne 47; subtract Line b from Line a and enter	
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$	
	b. 2, as stated in Line 47	\$	
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$
30	Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale	come taxes, self employment taxes, social	\$
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as volu	retirement contributions, union dues, and	\$
32	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.		\$
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$
34	Other Necessary Expenses: education for employment or for a ph the total average monthly amount that you actually expend for educat education that is required for a physically or mentally challenged dep providing similar services is available.	ion that is a condition of employment and for	\$
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$
36	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	our dependents, that is not reimbursed by the amount entered in Line 24B. Do not	s

37	Other Necessary Expenses: telecommunical actually pay for telecommunication services pagers, call waiting, caller id, special long diswelfare or that of your dependents. Do not it	\$				
38	Total Expenses Allowed under IRS Standa	\$				
	Subpart B	•				
	-	le any expenses that you have listed in Lines 24-37				
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.					
39	a. Health Insurance	\$				
	b. Disability Insurance	\$				
	c. Health Savings Account	\$				
	Total and enter on Line 39		\$			
	If you do not actually expend this total ambelow: \$	ou do not actually expend this total amount, state your actual total average monthly expenditures in the space ow:				
40	Continued contributions to the care of hou expenses that you will continue to pay for th ill, or disabled member of your household or expenses. Do not include payments listed in	\$				
41	Protection against family violence. Enter the actually incur to maintain the safety of your applicable federal law. The nature of these experiences are the safety of th	\$				
42	Home energy costs. Enter the total average Standards for Housing and Utilities that you trustee with documentation of your actual claimed is reasonable and necessary.	\$				
43	Education expenses for dependent children actually incur, not to exceed \$156.25 per chi school by your dependent children less than documentation of your actual expenses, an necessary and not already accounted for in	\$				
44	Additional food and clothing expense. Enter expenses exceed the combined allowances for Standards, not to exceed 5% of those combined from the clerk of the bankruptcy court.) Treasonable and necessary.	\$				
45	contributions in the form of cash or financia	t reasonably necessary for you to expend each month on charitable l instruments to a charitable organization as defined in 26 U.S.C. § in excess of 15% of your gross monthly income.	\$			
46	Total Additional Expanse Deductions and	er § 707(b). Enter the total of Lines 39 through 45.	\$			

B 22C (Official Form 22C) (Chapter 13) (04/13)

			Subpart C: Deductions for D	ebt]	Payment		
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.						
	Name of Creditor Property Securing the Debt Average Monthly include taxes Payment or insurance						
	a.			\$		□yes □no	
					otal: Add Lines		\$
48	payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
	a.	Name of Creditor	Property Securing the Debt		\$	he Cure Amount	
						Total: Add Lines	\$
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33. Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.						
50	a. b.	Current multiplier for ye	hly Chapter 13 plan payment. our district as determined under schedules Office for United States Trustees. (This	\$			
			at www.usdoj.gov/ust/ or from the clerk o	f x			
	c.		histrative expense of chapter 13 case	To	otal: Multiply Li	nes a and b	\$
51	Tota	Deductions for Debt Pay	ment. Enter the total of Lines 47 through	50.			\$
			Subpart D: Total Deductions	fror	n Income		-
52	Tota	of all deductions from in	come. Enter the total of Lines 38, 46, and	51.			\$
		Part V. DETER	RMINATION OF DISPOSABLE	INC	COME UNDI	ER § 1325(b)(2))
53	Total current monthly income. Enter the amount from Line 20.						\$
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.						\$
55	wage		as. Enter the monthly total of (a) all amountied retirement plans, as specified in § 541 specified in § 362(b)(19).				\$
56	Tota	of all deductions allowed	under § 707(b)(2). Enter the amount from	m Lin	ne 52.		\$

	Deduction for special circumstances. If there are special circumstances is no reasonable alternative, describe the special circum. If necessary, list additional entries on a separate page. Total provide your case trustee with documentation of these ex of the special circumstances that make such expense necessary.	mstances and the resulting expenses in lines a-c below. the expenses and enter the total in Line 57. You must prenses and you must provide a detailed explanation	
57	Nature of special circumstances	Amount of Expense	1
	a.	\$	11
	b.	s	
	c.	\$	
		Total: Add Lines	\$
58	Total adjustments to determine disposable income. Add result.	the amounts on Lines 54, 55, 56, and 57 and enter the	\$
59	Monthly Disposable Income Under § 1325(b)(2). Subtrac	et Line 58 from Line 53 and enter the result.	\$
	Part VI. ADDITIO	NAL EXPENSE CLAIMS	
	Other Expenses. List and describe any monthly expenses, no f you and your family and that you contend should be an act 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a each item. Total the expenses.	dditional deduction from your current monthly income	under §
60	Expense Description	Monthly Amount]
	a.	\$	
	b.	\$	
	c.	\$	
	d.	\$	
	Total: Add Li	ines a, b, c and d \$	
	Part VII.	VERIFICATION	
61	I declare under penalty of perjury that the information provi- must sign.) Date: 06/01/2013	ded in this statement is true and correct. (If this is a joint Signature: /s/ Tabatha Anne Shuber	
01		Tabatha Anne Shubert	<u>-</u>
		(Debtor)	